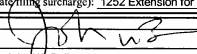
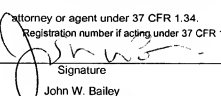


FEE TRANSMITTAL For FY 2006		Complete if Known	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number: 10/540,512-Conf. #6638 Filing Date: June 23, 2005 First Named Inventor: Nobuo Oi Examiner Name: F. M. Teskin Art Unit: 1713 Attorney Docket No.: 2185-0765PUS1	
TOTAL AMOUNT OF PAYMENT (\$): 450.00			

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FEES		SEARCH FEES		EXAMINATION FEES			
	<u>Small Entity</u>	<u>Small Entity</u>	<u>Small Entity</u>	<u>Small Entity</u>	<u>Small Entity</u>	<u>Small Entity</u>		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>	
Utility	300	150	500	250	200	100	_____	
Design	200	100	100	50	130	65	_____	
Plant	200	100	300	150	160	80	_____	
Reissue	300	150	500	250	600	300	_____	
Provisional	200	100	0	0	0	0	_____	
							<u>Small Entity</u>	
							<u>Fee (\$)</u> <u>Fee (\$)</u>	
Each claim over 20 (including Reissues)							50 25	
Each independent claim over 3 (including Reissues)							200 100	
Multiple dependent claims							360 180	
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
7		- 20 =	x	=	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>			
HP = highest number of total claims paid for, if greater than 20.								
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
1		- 3 =	x	=				
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u>		<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
_____		- 100 =	/50		(round up to a whole number) x	=	_____	
4. OTHER FEE(S)								
Non-English Specification, \$130 fee (no small entity discount)							<u>Fees Paid (\$)</u>	
Other (e.g., late filing surcharge): 1252 Extension for response within second month							450.00	

SUBMITTED BY			
Signature: 	Registration No. (Attorney/Agent): 32,881	Telephone: (703) 205-8000	
Name (Print/Type): John W. Bailey			Date: August 9, 2006

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 2185-0765PUS1	
Application Number 10/540,512-Conf. #6638		Filed June 23, 2005	
For PROCESS FOR PRODUCING OLEFIN-BASED COPOLYMER			
Art Unit 1713		Examiner F. M. Teskin	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.			
		Registration number if acting under 37 CFR 1.34	<u>32,881</u>
 _____ Signature		_____ Date	
_____ John W. Bailey Typed or printed name		_____ (703) 205-8000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			